

Comparison of CXCL10 levels in CD and UC subjects from whole blood +/- stimulation with IFN γ (1000 units/ml) shows increased variability in IFN γ stimulated samples

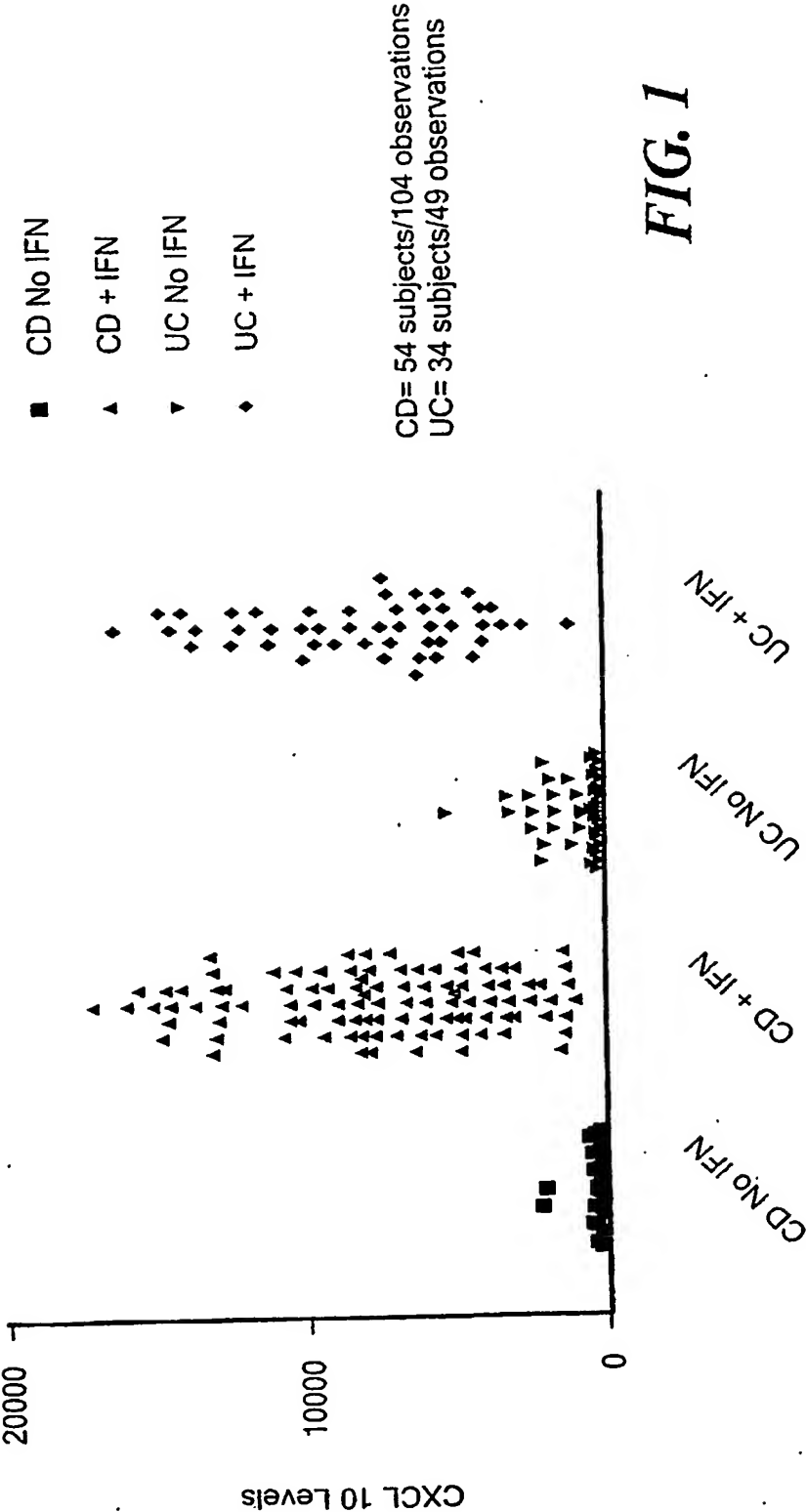
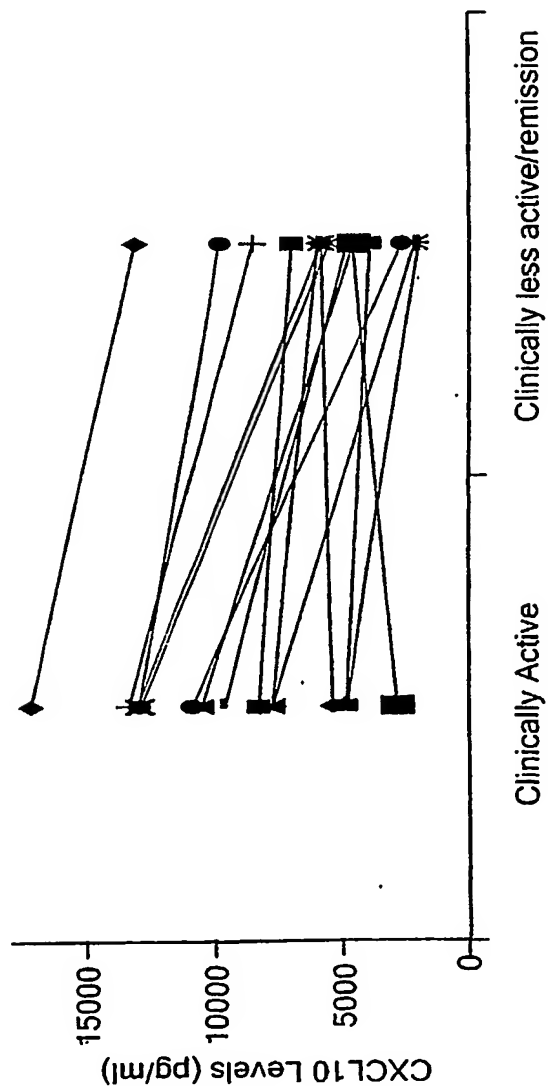


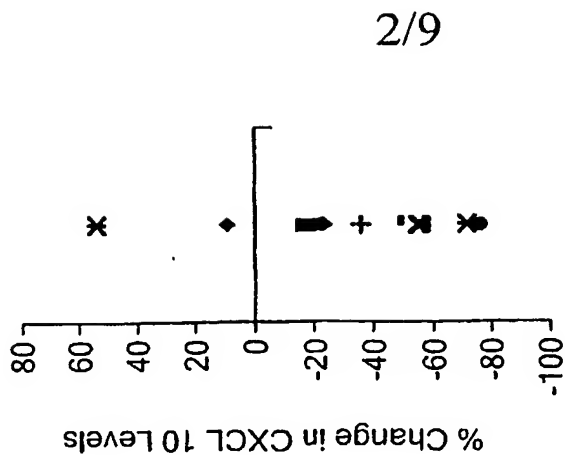
FIG. 1

Blinded assessment of changes in clinical disease activity correlates with CXCL10 levels within individual Crohn's Disease subjects (n=15)



Mean decrease = 34% (3,692 pg/ml)
Median decrease = 32% (4,130 pg/ml)

FIG. 2A



Mean decrease = 34% (3,692 pg/ml)
Median decrease = 32% (4,130 pg/ml)

FIG. 2B

Longitudinal Analysis of Six CD Subjects in clinical remission
over time

CXCL10 Levels while in remission state
(n=6, average time between donations ~8 months)

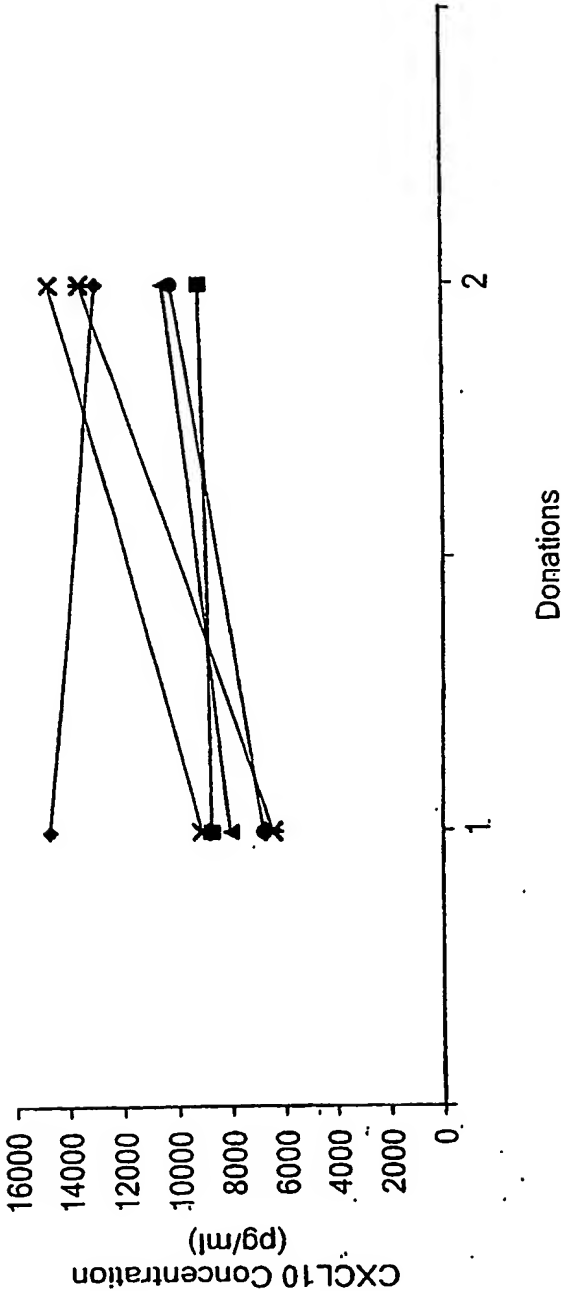


FIG. 3

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Analysis of Effects of Medication Usage on CXCL10 levels in CD subjects shows significant decreases in Steroid and Azathioprine/6MP use.

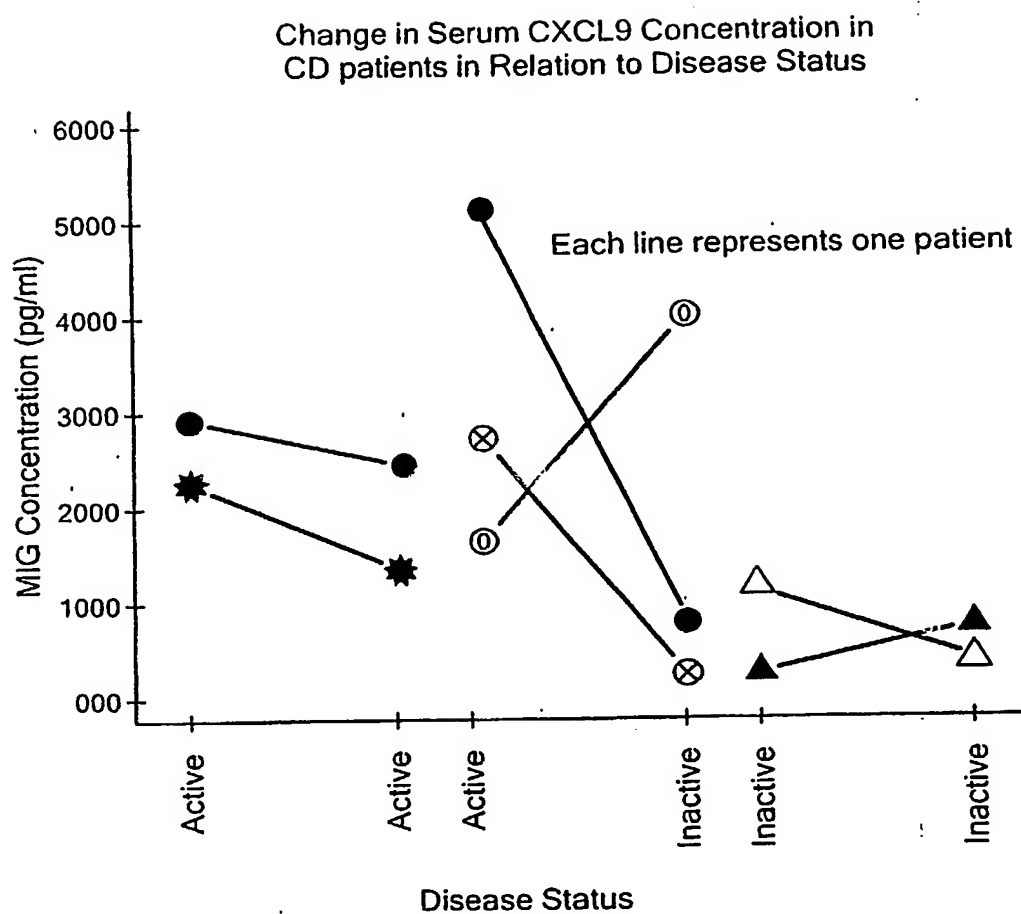
Analysis	Estimated Mean CXCL10	Standard Error	p-value
Steroids			
Yes	6691	705	
No	8505	464	
Difference	-1814	736	0.014
Antibiotics			
Yes	6626	1578	
No	8374	433	
Difference	-2048	1666	0.219
5ASA			
Yes	8081	471	
No	8139	817	
Difference	-58	865	0.947
Infliximab			
Yes	8065	474	
No	8411	860	
Difference	-346	944	0.714
Azathioprine/6MP			
Yes	8872	667	
No	7435	422	
Difference	1438	681	0.035

Multiple regression analysis for use of both Steroids and Aza/6MP was also statistically significant (Steroids -1868, $p=0.009$; due to Aza/6MP 1495 $p=0.033$).

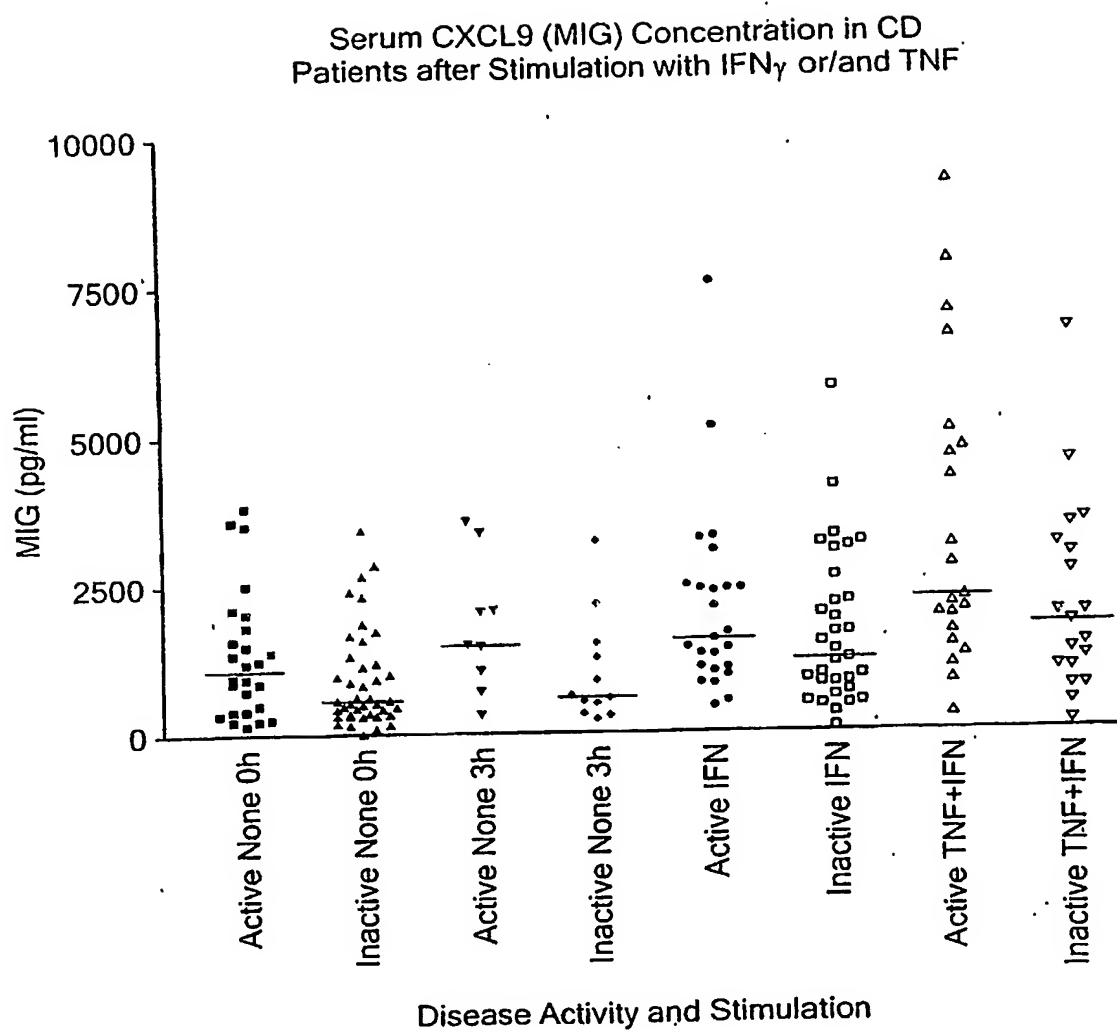
The generalized estimating equation (GEE) approach to linear regression was used to estimate the effect on CXCL10 levels in 54 CD subjects with 105 observations.

FIG. 4

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**FIG. 5**

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**FIG. 6**

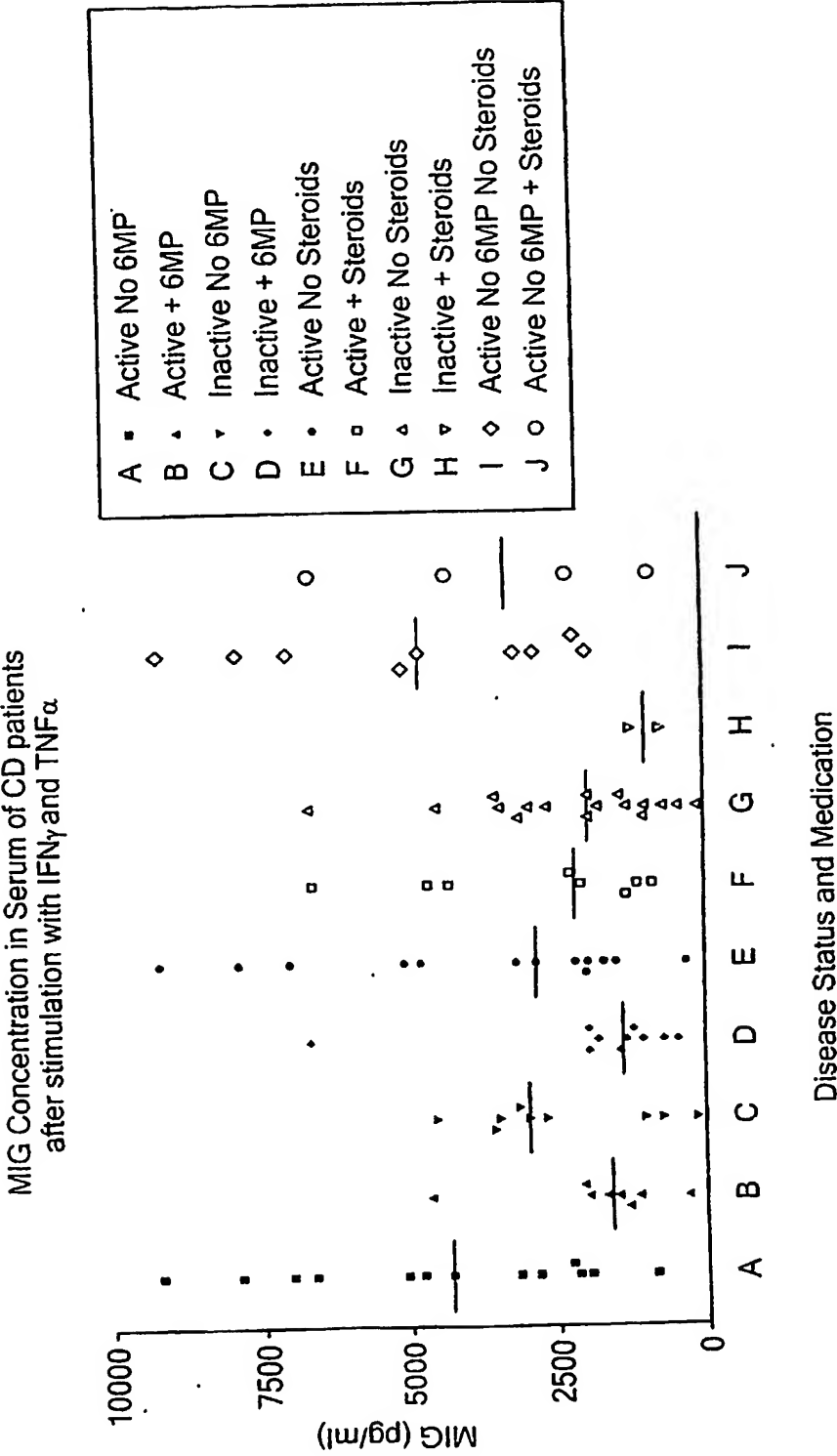


FIG. 7

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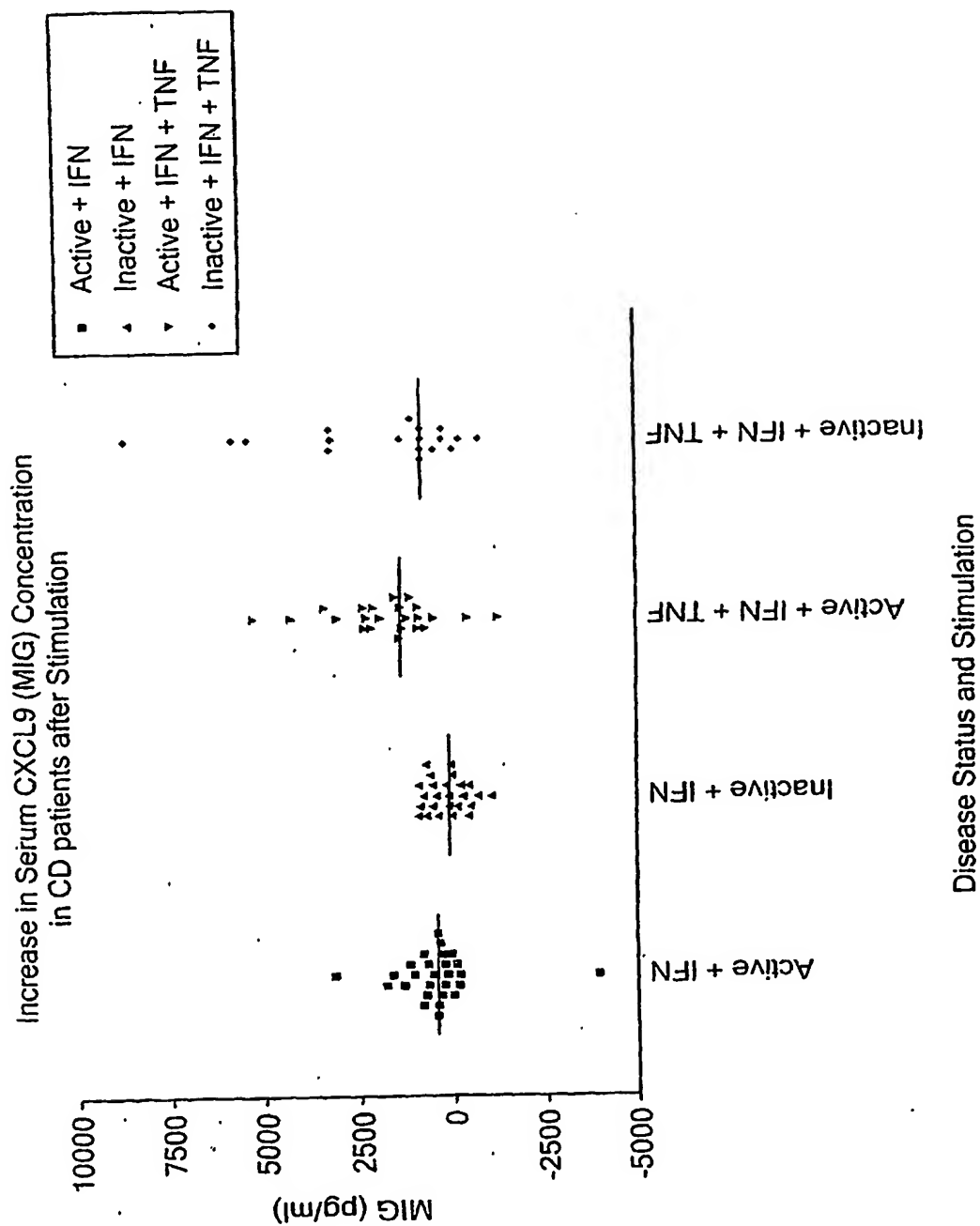


FIG. 8

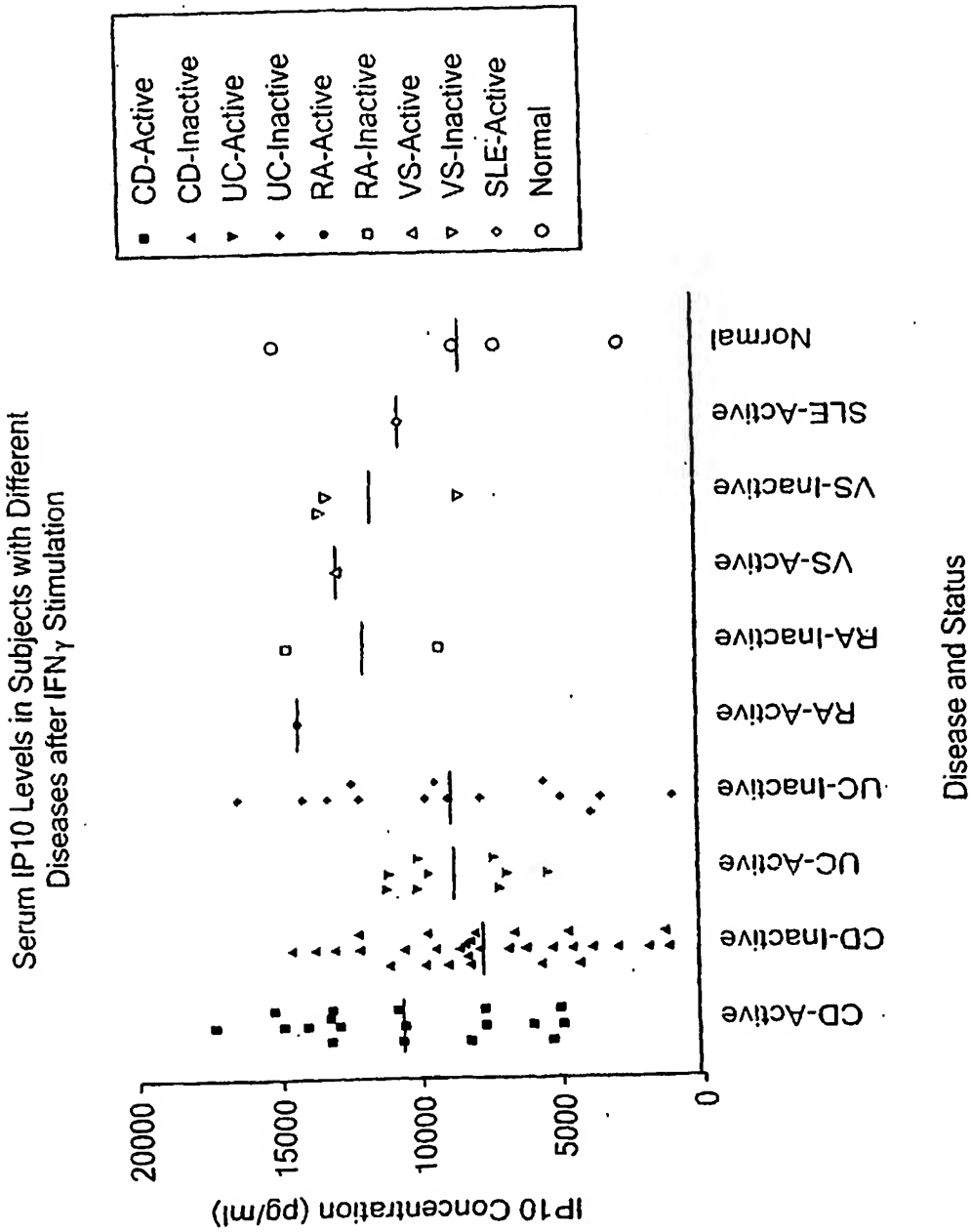


FIG. 9